

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	SJ	555	2/20/31
RESPONSE FORMALITY REVIEW			3/20/31

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
8	11/1/6
01	11/3/19
11	02/03/03
02	02/03/03
—	N
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7	✓ ✓
8	✓ ✓
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10	N N
11	✓ ✓
12	✓ ✓
13	✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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